



**GREATER MADISON AREA CITIZEN
POLICE ACADEMY APPLICATION
FUNDERBURK BUILDING
521 LANCASTER AVENUE
RICHMOND, KY 40475-3102
E-MAIL – stella.plunkett@ky.gov**



**Applicant must be 18 years of age or older to attend the Academy
No Prior Felony Convictions
Valid Driver's License Required**

Print in black ink or type all answers. Attach additional pages as needed.

Date: _____

Last Name: _____ First: _____

Full Middle Name: _____ Maiden: _____

DOB: _____ Age: _____ Driver's License Number: _____

Home Address: _____ City: _____ State: _____ Zip Code: _____

E-Mail Address (Home): _____ E-Mail Address (Work): _____

Home Phone #: _____ Pager #: _____ Mobile#: _____

Occupation: _____ Explain your position: _____

Company Name: _____

Address: _____ City: _____ State: _____ Zip Code: _____

Bus. Phone#: _____ FAX#: _____ E-Mail: _____

In case of emergency please notify:

Name: _____ Relationship: _____

Address: _____ Home Phone#: _____ Cell Phone #: _____

(CONTINUED)

Please answer the following questions:

1. Have you ever been arrested for a crime other than traffic offenses? Yes or No
If yes, please explain with disposition and dates. _____

***NOTE: APPLICANT CONVICTED OF A FELONY IS INELIGIBLE TO ATTEND THE ACADEMY.**

2. Do you have any special needs that require accommodation in order for you to participate in this program? Yes or No If yes, please explain: _____

Do you have any allergies? Yes or No If yes, please list: _____

3. Please state below why you are interested in attending the Greater Madison Area Citizen Police Academy. Please answer thoroughly.

4. Do you know any police officers? If so, please list: _____

5. How did you hear about the academy? _____

6. Are you interested in law enforcement as a career? Yes or No
If yes, please explain: _____

7. Please list any community organizations, associations or activities in which you participate:

8. List two character references who are not family members or employers:

Name _____ Home Number _____

Name _____ Home Number _____

I hereby certify that there are no willful falsifications, omissions, or misrepresentations in the foregoing statements and answers to the above questions. I understand that any omission or false statement on this application shall be sufficient cause for rejection for enrollment or dismissal from the Greater Madison Area Citizen Police Academy. I also grant permission for the Greater Madison Area Citizen Police Academy to verify the above information contained in this application.

Signature of Applicant

Date

Department of Criminal Justice Training
Attention: Coordinator Stella Plunkett
Funderburk Bldg., 521 Lancaster Avenue, Richmond, Kentucky 40475-3102
Phone: (859) 622-8099, Fax: (859) 622-5913
E-Mail: stella.plunkett@mail.state.ky.us